

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) Service Servic

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all info@batto@b this form. Por. 3: 52 assistance in completing this form, see instructions on the reverse side.					
IS THIS AN AMENDMENT?	☐ Yes	4.5			

	COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organiza	ation) Check if this is a new	v name		
Committe to Elect Mike Pu		ounship.	Truste	
2. Acronym or Abbreviated Name (if any)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	3. Committee Te		
		(317)	523-	4095
4. Mailing Address (address where all campaign finance	correspondence is received)	Check if this is a new		
8677 E. 196 St.				
5. City, State, ZIP Code		6. Party Affiliation		
Noblesville In. 46	062	Dem	ocvat	
CANDIDATE I	NFORMATION (For Candidate's			
7. Full Name of Candidate (include any nickname)	11. 11	8. Party Affiliation	n or if Independe	nt Candidate
John Michael PHUIS	Mike	Demo		
9. Office Sought (Include district number, if any. Not req.	• • •	10. County of Re	1 L	
Mobles ville Townsh	ip Trustee	ItAM		_
	F REPORT			N CANDIDATES ONLY
11. Check one:	<b>7</b>		Check one:	
Pre-Primary Pre-Election Annual Nomination			Pre-Con	
Final/Disbands Committee (lines 18, 19, and 20 must be *0") O	utgoing Treasurer (within 10 days amend Statemen	t of Organization)	☐ Post-Co	nvention
12. Reporting Period:			OLUMN A	COLUMN B
From: Jun 30, 2014 Thr	ough: 10-10-201	9	nis Period	Year to Date
13. Cash on hand and investments at the beginning of the	<del></del>		0	
14. Cash on hand and investments January 1, current ye				<del>-</del>
(Note: these amounts include in-kind contributions and lo				
15a. Itemized (use Schedule A)	Jans, as well as cash communities.	2010	641	2/10/11
15b. Uniternized	<del></del>	2610	0-1	2610.64
15c. Add lines 15a and 15b in both columns	SUE	STOTAL 26/0	9.64	2610.64
16. Add lines 13 and 15c in Column A and lines 14 and			<del> </del>	2610.64
EXPENDITE		TOTAL 261	0.69	2610.00
(Note: These amounts include in-kind expenditures and				
17a. Itemized (use Schedule B) (Public Question: use So		22	60.64	2360.64
17b. Uniterhized		2 3	<u> </u>	100.07
17c. Add lines 17a and 17b in both columns	Su	BTOTAL 73	60.64	2360.64
18. Cash on hand and investments at close of this reporting period	<del>- · · · · · · · · · · · · · · · · · · ·</del>	TOTAL 25	0 , 50	250.00
19. Debts OWED BY the committee (use Schedule D)			00	A 30.00
20. Debts OWED TO the committee (use Schedule E)			CT STRI	1
				OEUUX BEVAER
Π	ERTIFICATION	TRUE CORRECT AND		FOR OFFICE USE ONLY :0 Hd 81 130 hl
	BEST OF MY KNOWLEDGE AND BELIEF IT IS Title	Date	COMPLETE. P.C.	: 5 Ha 61 130 H
	Treasurer		3-14	· · · · · · · · · · · · · · · · · · ·
<b>∤</b>		D.11		्यु अक्टार्ट स्टूब्स् स्टूब्स्ट्रिस
		10-	13-14	
	pied for sale or used for any commercial purpos A person who fails to file a complete or acco			
	A person who talls to the a complete or accomplete or accomplete.			



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# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER						
_						
Page	of	3				

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
1. John M. DAVIS / Self 8677 4. 196 st	Contributions:  Direct In-Kind (describe)	900.00 862.32		7-14-14 10-10-14 10-10-14
Noblesville, In 46062	Other Receipts:  Interest Loan  Misc. (specify)	33,32	1685.64	John Day
contributor's Occupation (if required) Town ship Investigate  2. Joanie Weber  1170 Clinton st	Contributions:  Direct In-Kind (describe)	100.00	100,00	8-3-4
Noblesville, In 46060	Other Receipts: Interest Loan Misc. (specify)			John Opux
Contributor's Occupation (if required)				
3 Billie Caldwell 348 Beechwood Dr	Contributions: Direct In-Kind (describe)	100.00	200.00	8-10-14
Noblesvilly, In 46060	Other Receipts:  Interest Loan  Misc. (specify)		_	Ichn Dyvis
Contributor's Occupation (if required)				
Girly Steel 336 S. 8th	Contributions: Direct Fin-Kind (describe) Slaw Art Donata	1 250.00	250	9-27-14, John DAG
Mobles VIII e  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Misc. (specify)			
5.	Contributions:  Direct In-Kind (describe)			
Contributor's Occupation (if maximal	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)	IND DACE OF COLUMN			
TOTAL OF ALL PAGES OF SCHEDULE A	HIS PAGE OF SCHEDULE A ON THE LAST PAGE ONLY	\$2236,64		



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#### (CFA-4 SCHEDULE A-2) **CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This	FILE NUMBER
schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).	Page of

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Voice Mail Inc.	Contributions:  Direct In-Kind (describe)	200.00	206.00	7-8-14
		Other Receipts: Interest Loan Misc. (specify)			John M DAVIS
2.		Contributions:  Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
3.		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
4.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			,
5.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
		THIS PAGE OF SCHEDULE A	\$ 200,00		
	TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$		



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#### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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party committee/.				
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 Hamiton County Women Democrats	Contributions:  Direct  In-Kind (describe)  Other Receipts:  Interest Loan	100.00	100.00	7-16-14 John D401s
2 Hamilton County Democration Club GOD Conner Creek Dr.	Misc. (specify)  Contributions:  Ulrect  In-Kind (describe)	75.00	75.00	9-20-14
GOD Conner Creek Dr. Fishers, In. 46085	Other Receipts:  Interest Loan  Misc. (specify)			John Davis
3.	Contributions:  Direct In-Kind (describe)  Other Receipts:			
	Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 175.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet)	\$ 175.00		



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# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

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	DECIDIENT'S OCCUPATION					!
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE	
	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXI ENDITORE	
code A Face book		Direct In-Kind	41.	05111	7 12 111	
Ads		Returned Contribution	25.18	25.10	7-12-14	
adorun Knewn		Other				
		Campaign Page	<u> </u>			
code It Facebook Ads		☐ Direct ☐ In-Kind ☐ Payment of Debt				
Halvess unknown		Returned Contribution	50.16	50.16	7-20-14	
' · · · · · · · · · · · · · · · · · ·		Purpose: Promotic	00.41	9011	G-20-14	ý
the back Ads		Compagn Pox	48.16	18,40	7 30 1 1	
Code A Super Cheap Sign		☐ Direct ☐ In-Kind ☐ Payment of Debt	# 1102 2	2	2 22	-14
Address unknown		Returned Contribution	1,102.2	1,182.23	7-22	,
Ordered online		Purpose: Virid 31912				
N 11'1 0° 1		Car magnests				
code A Vista Print		Direct In-Kind Payment of Debt				
Address unknown		☐ Returned Contribution ☐ Other	70.12	70.72	8-13-14	
ordered on line		Purpose: Businicss card		1		
Code A Vista Print		Direct In-Kind				
Address unknown		Payment of Debt		134.89	8-13-14	
ordered online		☐ Returned Contribution ☐ Other	134.89	121,01		
		Purpose:				
code A Girly Steel		Direct In-Kind				
Code A Girly Steel 336 S. 8th 5t.		☐ Payment of Debt☐ Returned Contribution	100.00	100,00	9-30-	14
Noblesville, In		Other	700	·	} `	
ī l		Purpose: 515 "				
Code A Sugarnere Wews NUBICAVILLA TIME P.O. BOX 272		Direct In-Kind				
Noblesville limes		☐ Payment of Debt ☐ Returned Contribution	C00 0	69910	10-1-1	1
P.O. Box 272		Other	697.00			
Crawfordsville. In. 47933		Purpose: peper Ads				
9/105	SUBTOTAL THIS PAG	<del></del>	\$2360.64			
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$2360.64			
	(Enter total on ITEM 17a of t	he Summary Sheet)	47200,01			